WATER LEAK ADJUSTMENT REQUEST

Date of Request:	Number of residents:
I am requesting an adjustment on the utility bill at the following location: Customer Name:	
Account Number:	Customer Number:
Telephone Number a	nd Email:
I am applying for a possible credit adjustment on my utility account with the understanding that once the review process has been completed, the account MAY NOT be eligible for a credit. The review process is performed in the order the requests are received and credits issued will be reflected on my utility statement as an adjusted amount. There will not be an adjusted bill sent out. I understand that payment may not be withheld; the payment must be current to avoid the penalty charges and possible termination of service.	
	Statement of repair
	Date:
By your signatu	re, you are stating you understand the terms of this request
	count qualifies for an adjustment, the credit will be
adjustment on a past	nan 3 months on any one leak per year. Applying for an due account does not exempt a customer from making eep your account in good standing in order to avoid of services*
Once adjustment has been reviewed, a representive will attempt to make contact with customer. Customer will be responsible for all past due	
year*	es. *Only 2 adjustments may be requested per calendar
******	*******FOR OFFICE USE ONLY********
RECEIVED BY:	Cycle and Book #